CLAIMS ONLY

Application Number	Filing Date
10800625	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2	0						52						
3		1					53						
4	1						54						
5		1					55						
6	1						56						
7		1					57						
8	0						58						
9	1						59						
10		1					60						
11		1					61						
12	1						62						
13		1					63						
14	1						64						
15		1					65						
16		1					66						
17		1					67						
18		1					68						
19		1					69						
20		1					70						
21	1						71						
22		1					72						
23		1					73						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	9						Total Indep						
Total Depend	14						Total Depend						
Total Claims	23						Total Claims						